

This Form is for INTERNAL USE ONLY
It does NOT get mailed to the applicant.

NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: 09/624274

Total Fee Calculation

Fee Code	Total # Claims	Number Extra	X	Fee	Fee	=	Total
Sm./Lg.					Sm. Entity	Lg. Entity	
Basic Filing Fee	<u>201/101</u>						<u>690</u>
Total Claims >20	<u>203/103</u>	<u>24</u>	-20 =	<u>4</u>	X		<u>72</u>
Independent Claims >3	<u>202/102</u>	<u>3</u>	-3 =		X		
Mult. Dep Claim Present	<u>204/104</u>						
Surcharge	<u>205/105</u>						
English Translation	<u>139</u>						<u>130/61</u>
<u>TOTAL FEE CALCULATION</u>							<u>892</u>

Fees due upon filing the application:

Total Filing Fees Due = \$ 892

Less Filing Fees Submitted - \$ 0

BALANCE DUE = \$ 892

SMC
Office of Initial Patent Examination